RECEIVED CENTRAL FAX CENTER

DEC 0 7 2005

LEVINE BAGADE LLP

B www,LBLLP.com

2483 East Bayshore Road Suite 100 Palo Alto, CA 94303 Tel: 650.242.4212 Fax: 650.284.2180

Customer No. 40518

FAX

To:	Commissioner for Patents	from:	Sanjay S. Bagade
Fax:	(571) 273-8300	Pages:	18 (including cover page)
Phone:		Date:	December 7, 2005

Comments: OFFICIAL FILING - RESPONSE TO NON-FINAL OFFICE ACTION

Application No.: 10/798.018 Filing Date: March 11, 2004

Title: SURGICAL FASTENING SYSTEM Inventor(s): Michael D. LAUFER et al.

Examiner: G. Dawson Group Art Unit: 3731

Attorney Docket No.: LAUFNZ00100

Papers attached:

- 1. Transmittal 1 page
- 2. Fee Transmittal 1 page
- 3. Credit Card Payment Form 1 page
- 4. Response to Non-Final Office Action 11 pages
- 5. Replacement Drawings 2 pages
- 6. Extension of Time 1 page

BEST AVAILABLE COPY

Name (Print/Type)

Laura L. Shires

DEC 0 7 2005

PTO/SB/17 (12-04v2)

Date, December 7, 2005

Approved for use through 07/31/2008. OMB 0651-0032
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
of collection of information unless it displays a valid OMB control number. Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of tr Complete if Known Effective on 12/08/2004. percentations Act. 2008 (H.R. 4818) Foor purguant to the Consolidated A Application Number 10/798.018 FEE TRANSMITTAL Filing Date March 11, 2004 For FY 2005 First Named Inventor Michael D. LAUFER G. Dawson Examiner Name Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3731 TOTAL AMOUNT OF PAYMENT 60.00 LAUFNZ00100 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other (please identify); None Deposit Account Deposit Account Number Deposit Account Name: For the above identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Chame fee(s) indicated below; except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit eard information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** FILING FEES SEARCH FEES Small Entity Small Entity **Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) **Application Type** Foc (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 200 100 130 Design 100 50 65 Plant 200 100 3.00 150 160 80 Reissue 300 150 500 250 600 300 200 Provisional 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 200 100. Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Multiple Dependent Claims: Total Claims Extra Claims Fee (3) Fee Paid (\$) 28 - 29 Fee Paid (\$). 0 25 Fee (\$) 0 HP = highest number of total claims gaid for, if greater than 20. 180 Extra Claims Indep. Claims Fee (\$) Fee Paid (\$) - 3 0 100 0 HP = highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 Total Sheets Fee Paid (\$) . Fee (\$) - 100 = /·50 = (round up to a whole number) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): One-month extension of time 60 SUBMITTED BY Registration No. 42,280 Telephone (650) 242-4212 Signature (Attomey/Agent)

This collection of information is required by 37-CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application forms to the USPTO. The will very depending upon the individual case. Any comments on the your require to complete jibs form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.